

Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible. It should be typed)

Filer Identification Number	* * * * * * * * * * * * * * * * * * *	Report Filed E (Mark X)	By Candidat	te X	Committee		Lobbyist
Name of Filing Committee, Candidate or Robert Yates							
Street Address	1	.320 Chelsea Av	re				
City Erie	<u>ent portugue.</u>		State	PA	Zip Code	16506	
Type of Report (Place x under re	port type)						
200 11 41 1 1 20 1 20 1 2 2 3 3 4 4 5 7 7 7 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7	3- 30 Day Post 4 Primary P	- 6 th Tuesday re- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
Date Of Election (MM/DD/YYYY)	11/07/17	Year	2017	Amendment Report		Termination Report	
	From Date	To Dat			For	Office Use Only	
Expenditures	6/6/17		10/23/17				
A. Amount Brought Forward Fro	om Last Report	\$	683.34				
B. Total Monetary Contribution (From Schedule I)	is and Receipts	\$	5405.00			\$0	2017 OCT
C. Total Funds Available (Sum of Lines A and B)		\$	6088.34			22	8
D. Total Expenditures (From Schedule III)		\$	4485.93			문 유	27
E. Ending Cash Balance (Subtract Line D from Line C)		\$	1602.41				至入
F. Value of In-Kind Contribution (From Schedule II)	ns Received	\$	51.3			REGISTRATION	· යූ 🔨 - ව
G. Unpaid Debts and Obligation (From Schedule IV)	ns	\$				Name of the second	တ
BANK TO THE PARTY OF THE PARTY	e ipi jate pipada de 11,24 i	. 1 1	Affidavit Se				
Part 1- If this is a Committee report.	including the attach	hed schedules o	on paper, is to the	best of my knowled	dge and belief 1	crue, correct and comple	ete.
I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete. Sworn to and subscribed before me this Aday of OCH 20 NOTARIAL SEAL Jessica M. Brink, Notary Public Signature My Commission expires April 10, 2019 My Commission expires 4 - 10 - 2019 My Commission expires 4 - 10 - 2019							
MO.	DAY YR.		i	Area Code	Ďa	ytime Telephone Numb	per
Part II- If this is a report of a Candidate's Authorized Committee, candidate shall sign here. I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.							
Sworn to and subscribed before me this							
day of20Signature of Candidate							
Signature	Drivered Nome						
		, ,				· 	
My Commission expires MO.	ĎAY YR.	-		Area Code	Da	ytime Telephone Numb	er

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number		
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	, #+ v)	
Total for the reporting period (1)) \$	<u> </u>
		630
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	a ve a Ari	
Contributions Received from Political Committees (Part A)	\$	250.00
All Other Contributions (Part B)	\$	2825.00
Total for the reporting period (2)) \$	3075.00
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)	\$	0.00
All Other Contributions (Part D)	\$	1700.00
Total for the reporting period (3)) \$	1700.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		Angele de la Companya de la granda de la granda de la companya de la companya de la companya de la companya de Companya de la Companya de la compa
Total for the reporting period (4)) \$	0.00
Total Monetary Contributions and Receipts during this reporting period (Add and	\$	

5405.00

enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report

Cover Page, Item B)

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from Political Committees with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification	Number								
								_	Amount
Full Name of Con	tributing						Date [MM/DD/YYYY]	\$	
Committee		COMMITTEE	E TO ELECT	ART OLIGE	ERI	_	9/18/17		150.00
House # 5447	Street Ad		NDY DRIVE				Date [MM/DD/YYYY]	\$	
City ERIE	<u> </u>		State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$	
Full Name of Con	tributing				The second second	2	Date [MM/DD/YYYY]	\$	
Full Name of Con Committee		COMMITTEE	E TO ELECT	ГОНИ НОГ	RNAMAN		9/18/17		100.00
House # 4837	Street Ad	- 1	MMER STR	EET			Date [MM/DD/YYYY]	\$	
City ERIE			State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$	
Full Name of Con Committee	ntributing		1	<u> </u>	<u>l </u>	<u>. I</u>	Date [MM/DD/YYYY]	\$	
House #	Street Ad	ddress					Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	. \$	
Full Message	tributio-		<u> </u>		<u> </u>		Date [MM/DD/YYYY]	\$	
Full Name of Cor Committee	inuting						TAMAN DOLLITTI	۱ ا	l
House #	Street Ac	ddress					Date [MM/DD/YYYY]	\$	1
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
100 100 100 100 100 100 100 100 100 100									
Full Name of Cor Committee	ntributing						Date [MM/DD/YYYY]	\$	
House #	Street Ac	ddress					Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
P. H. A.	New the second		<u> </u>		<u> </u>		Data (MANA/An Anna	196.9	
Full Name of Cor Committee			_	_			Date [MM/DD/YYYY]	\$	
House #	Street Ad	ddress					Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
oc day a said					to the state of the	<u>.</u>			1

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

The state of the s	
Filer Identification Number:	
N. W. William J. Charles (1992). A ARCA - March 2004. [1984]	
\$22 (\$27 1) Bet \$10 2 20 20 1 1 2 20 20 20 20 20 20 20 20 20 20 20 20 2	

				(4 6
Full Name of Contributor				(\$ 150.00
EDV	VIN SMITH		08/23/17	130.00
House # Street A	Address	··· ·	Date [MM/DD/YYYY]	\$ /
5274	WEST 53RD STREET		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
City	State	Zip Code	Date [MM/DD/YYYY]	\$
FAIRVIEW	PA	16415	1. One of the section	
Full Name of Contributor			Date [MM/DD/YYYY]	\$
	OMAS HUTZELMAN		08/23/17	200.00
English and the second second	9k 86888 #67 23ú		85	\$ 2
House # Street /	Address RUSTIC LANE		Oate [www/DD/1111]	
3220	ROSTIC LAIVE			
City ERIE	State PA	Zip Code 16506	Date [MM/DD/YYYY]	\$
ERIE		7. 6 (1967)		
Full Name of Contributor			Date [MM/DD/YYYY]	
RO	BERT YETES		8/24/17	200.00
House # Street	Address		Date [MM/DD/YYYY]	\$
1320	CHELSEA AVE			
	State	Zip Code	Date [MM/DD/YYYY]	S
City ERIE	PA	16505		
100 mg 1 1 mg 22		A PART OF A PART		
Full Name of Contributor			Date [MM/DD/YYYY]	\$ 100.00 ·
WIII	LLIAM MAKAROWSKI		6/24/17	100.00 -
House # Street	Address		Date [MM/DD/YYYY]	
5075	TRAMALAC LN			
Gity.	State	Zip Code	Date [MM/DD/YYYY]	\$
ERIE	PA	16506		
Full Name of Contributor	[4-5438c-58-5]	prompting Section 600 Months (1)	Date [MM/DD/YYYY]	\$
	ARY DUVAL		9/18/17	150.00
	Address		Date [MM/DD/YYYY]	\$
House# Street	GEORGIAN CT			
	0.00 (a contract, topologica patricia M		
City ERIE	State PA	Zip Code 16506	Date [MM/DD/YYYY]	\$
				70.00 3.00 3.00 3.00 3.00 3.00 3.00 3.00
Full Name of Contributor			Date [MM/DD/YYYY]	200.00
ED	WARD GOEBEL JR		9/18/17	200.00
House # Street	Address		Date [MM/DD/YYYY]	\$
3226	GEORGIAN CT			
	CFA	Zip Code	Date [MM/DD/YYYY]	<u> </u>
City ERIE	State PA	16506	Berthammer amen and se	

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

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(大量を対象の動物があるとは重要などはあるとなるとなっています。				1
Filer Identification Number:				
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1.00 A 12.00 A 2.00 A 2				
ALCHERTIC SECRETARION CONTROL ON PORT ARROTTED				
1900 Walker 1900 W				
Analysis deficitions and the Transfer of the T		 	 	

022003 100 000 000 000 000 000 000 000 000		PROCESS TO THE PROCESS AND	
Full Name of Contributor EDWIN SMITH	Date [MM/DD/YYYY]	5 200.00	
EDWIN SMITH		09/18/17	200.00
House # Street Address		Date [MM/DD/YYYY]	
5274 V	EST 53RD STREET		
City	State Zip Code	Date [MM/DD/YYYY]	L
FAIRVIEW	PA	16415	
Full Name of Contributor		Date [MM/DD/YYYY]	
JEFFREY PLYLE	₹	09//18/17	200.00
House # Street Address		Date [MM/DD/YYYY]	14 5
CB 2000 C C C C C C C C C C C C C C C C C	RY RD		
City as	State Zip Code	Date [MM/DD/YYYY]	
MCKEAN	PA	16426	
Full Name of Contributor		Date [MM/DD/YYYY]	1. 5.
NED CARLSON		09/18/17	200.00
House# several Address		Date [MM/DD/YYYY]	
2077 Table Jouest Address	EORGIAN CT		
		and the second	
City ERIE	State Zip Code	Date [MM/DD/YYYY]	<u> </u>
ENE STATE			
Full Name of Contributor MARNIE	-	Date [MM/DD/YYYY]	2007 DE SESSE
MARYAAN-HU	BBELL EVANOFF-MCGEORGE	09/18/17	150.00
House # Street Address		Date [MM/DD/YYYY]] \$
FIGURAL REPORT FOR THE PROPERTY OF THE PROPERT	ANDSTONE CT		
City	State Zip Code	Date [MM/DD/YYYY]	l \$
ERIE	PA	16505	
Full Name of Contributor	Low configuration and Low configuration of a second control of the configuration of the confi	Date [MM/DD/YYYY)	- 1 3 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
FRANCES HUB	ER	9/18/17	200.00
House # Street Address		Date [MM/DD/YYYY]
	ARMONSBURG ROAD	A transfer of the state of the	
City	State Zip Code	Date [MM/DD/YYYY	<u> </u>
MEADVILLE	PA	16335	
Full Name of Contributor		Date [MM/DD/YYYY	1: 1 \$
MARY SCHAA	:	9/18/17	150.00
		Date (MM/DD/YYYY	
House # Street Address 5109	VATSON ROAD	Date [MINI/DD/XXXX	
7109			19335
GRY	State Zip Code	Date [MM/DD/YYYY	1 5
ERIE	TA STATE OF THE ST	1	

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:

Full Name of Contributor			Date [MM/DD/YYYY]	\$
MARY WHIF	PPLE	10/3/17	100.00	
House # Street Address			Date [MM/DD/YYYY]	\$
3932	VENICE DR			
City (State	Zip Code	Date [MM/DD/YYYY]	S
ERIE	PA	16506		
Full Name of Contributor			Date [MM/DD/YYYY]	\$
GERALD RH	ONE		10/3/17	200.00
House # Street Address			Date [MM/DD/YYYY]	\$
5121	FERNDALE PLACE			
City :	State	Zip Code	Date [MM/DD/YYYY]	
FAIRVIEW	PA PA	16415		
Full Name of Contributor			Date [MM/DD/YYYY]	Š
LINDA HAVI	RILLA		10/3/17	75.00
House # Street Addres	Š		Date [MM/DD/YYYY]	
6550	FAIROAKS CIRCLE			
Icity	State	Zip Code	Date [MM/DD/YYYY]	11(4)(1) 2
FAIRVIEW	PA	16415		
Full Name of Contributor	高級電腦系統	DESCRIPTION	Date [MM/DD/YYYY]	
DEANNA KI	LIEN		10/3/17	150.00
House # Street Addres	s		Date [MM/DD/YYYY]	\$
3282	GEORGIAN COURT			
Gity	State	Zip Code	Date [MM/DD/YYYY]	\$
ERIE	PA	16506		
Full Name of Contributor	The American State of		Date [MM/DD/YYYY]	\$
DOUGALD	CURRIE		10/3/17	200.00
House # Street Addres	<u> </u>		Date [MM/DD/YYYY]	
5234	WOLF RUN VILLAGE	LANE		
City	State	Zip Code	Date [MM/DD/YYYY]	5
ERIE	PA	16505		
Full Name of Contributor	France and Associated	Date [MM/DD/YYYY]	\$	
House # Street Addres	ss		Date [MM/DD/YYYY]	\$
Alaban Grantsa				
Giw	State	Zip Code	Date [MM/DD/YYYY]	######################################
			g verb i great our groupes and the conspiration and the second to the Norwell Constitution and the second second to the second second to the second s	

PART C

Contributions Received From Political Committees

Over \$250.00

Use this Part to itemize only contributions received from Political Committees with an aggregate value over \$250.00 in the reporting period.

Filer Identification Number	PU		-		
Full Name of Contributing Committe				Date [MM/DD/YYYY]	
	Street Address			Date [MM/DD/YYYY]	\$
Gity	State		Zip Code	Date [MM/DD/YYYY]	
Full Name of Contributing Committe		<u> </u>	TOTO (TERROLLANDIAN MENTAL)	Date [MM/DD/YYYY]	
House #	Street Address			Date [MM/DD/YYYY]	5
City	State		Zip Code	Date [MM/DD/YYYY]	
Full Name of Contributing Committee	3 .		,	Date [MM/DD/YYYY]	
House #	Street Address			Date [MM/DD/YYYY]	\$
City	State		Zip Code	Date [MM/DD/YYYY]	
Full Name of Contributing Committ				Date [MM/DD/YYYY]	
House#	Street Address			Date [MM/DD/YYYY]	
Giv,	State		Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committ				The conference of the conferen	
House #	Street Address	NA.	The second secon	Date [MM/DD/YYYY]	\$
City	State	e	Zip Code	Date [MM/DD/YYYY]	
Full Name of Contributing Commit	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Date [MM/DD/YYYY]	
House #	Street Address	2011 I	45 pag 29 5 mile	Date [MM/DD/YYYY]	
alv	Stat	e	Zip Code	Share Hanalyn National	

PART D

All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C)

Filer Identification Numb	er:					
	差 据3					
Full Name of Contribu	tor#			Date [MM/DD/YYYY]		
RICK GRIFFITH				7/12/17	500.00	
House #	Street Address			Date [MM/DD/YYYY]		
2955		WEST 17TH STREET				
City	<u> </u>	State	Zip Code 16506	Date [MM/DD/YYYY]	Š	
ERIE	W. 4100 Montager 130	PA PA	16506	Occupation		
Employer Name		RICK GRIFFITH PROPER	TIES	OCCUPATION		
Employer Mailing Add Principal Place of Busi		2955 W 17TH STREET,	ERIE, PA 16506			
Full Name of Contribu		웹		Date [MM/DD/YYYY]	i S	
	JAMES A C	JRRIE JR		9/18/17	300.00	
House #	Street Address			Date [MM/DD/YYYY]	12-33-4 13-5-33 1-2-3-3-3	
13981		N ALYSSUM WAY				
City		State	Zip Code	Date [MM/DD/YYYY]		
ORO VALLEY		AZ	85755			
Employer Name RETIRED				Occupation RETIRED		
Employer Mailing Add Principal Place of Bus						
Full Name of Contribu	ANGENE STATE OF THE PARTY OF TH	看		Date [MM/DD/YYYY]	**	
	4,000,000	MAKAROWSKI		9/18/17	400.00	
House #	Street Address			Date [MM/DD/YYYY]	5	
5075		TRAMALAC LN				
City		State	Zip Code	Date [MM/DD/YYYY]		
ERIE		PA	16505		18 18 18 18 18 18 18 18 18 18 18 18 18 1	
Employer Name RETIRED				Occupation RETIRED		
Employer Mailing Ad Principal Place of Bus		100 mg/s				
Full Name of Contrib	A. 2000 M. 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -			Date [MM/DD/YYYY]		
Augustania (n. 1864). Augustania	PAUL MAI	NGO		10/3/17	500.00	
House #	Street Addres	Š		Date [MM/DD/YYYY]		
116		SNOWBERRY LN				
City	KAN BURKER JA	State	Zip Code	Date [MM/DD/YYYY]	S	
GIBSONIA		PA				
Employer Name		UNEMPLOYED		Occupation POLITICAL C	ANDIDATE	
Employer Mailing Ad	dress//			Piro springencieno grandental		

Principal Place of Business

PART E

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Numb	ver:			
	199624			
Full Name				
House #	Street Address			
City	The state of the s	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Füll Name	Comment of the commen			
House #	Street Address			
City	Acceptance of Carlot	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address			
City	Less Coulomb C	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		■ 1.4 3 G 20 3 5 5 5 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6	Felt god 2000.05	P(-9).1
Full Name				
House #	Street Address			
City	TOTAL CONTROL	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		grand general prof		
Full Name	To a second seco			
House#	Street Address			
City Date of the City of the C		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		司第音符号	1 (1998) 1 (
Full Name				
House #	Street Address			
City	PARTIE SELECTION AND THE SELEC	State	Zip Gode	Date [MM/DD/YYYY] \$
Receipt Description				

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number:		
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$	50.00 O	R LESS PER CONTRIBUTOR
TOTAL for the reporting period (1)	\$	
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$25	0.00 (FI	ROM PART F)
TOTAL for the reporting period (2)	\$	51.31
3 IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FRO	JM PAR	TG)
TOTAL for the reporting period (3)	\$	Step 181 and good contraction or any enterpression and a state of the
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also ente on Page 1, Report Cover Page, Item F)	\$ er	

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

FIRE IDEMINICATION					
Full Name of Co	entributor			Date [MM/DD/YYYY] \$	
				· · · · · · · · · · · · · · · · · · ·	
House #	Street Addres	S		Date [MM/DD/YYYY] \$	
				Anna Ma	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Description of C	-overski trop				
Full Name of Co	entributor			Date [MM/DD/YYYY] \$	
House #	Street Addres	is i		Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Description of (Contribution				
Full Name of Co	ontributor			Date [MM/DD/YYYY] \$	
en operation in the second					
House #	Street Addres	35		Date [MM/DD/YYYY] \$	
19 17 42 70. 10 12 15 15 17		24 20 20 20 20 20 20 20 20 20 20 20 20 20			
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Description of	Contribution		Market Conference of the Confe		
Full Name of C	ontributor			Date [MM/DD/YYYY] \$	
Gerope Station (in Monge of Stations					
House #	Street Addre	SS SS		Date [MM/DD/YYYY] \$	
City	Proprieta de la compansión de la compans	State	Zip Code	Date [MM/DD/YYYY] \$	
Description of	Contribution		100 4 0 12 14 15 15 15 15 15 15 15 15 15 15 15 15 15		
CHARTECENS, FOR	er properties are englished			Date [MM/DD/YYYY] \$	
Full Name of C	ontributor			Pare Livini Political S.	
House#	Street Addre	255 255		Date [MM/DD/YYYY] \$	
Dr. Berger			Zip Code	Date [MM/DD/YYYY] \$	
City		State			,
Description of	Contribution				
A THE RESIDENCE AND A SPECIAL STREET,	And the second second second second				

SCHEDULE II Part G

In-Kind Contributions Received

			VALUE OVER \$250	
Filer Identification	Number:			
Eventus 61 on				
Sample of the Control	NAME OF THE OWNER O			Date [MM/DD/YYYY] \$
Full Name of Cor	uterputor			
				Date IMM/DD/YYYYI
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
			(2017年) (100年)	TO A CONTROL OF THE PROPERTY O
Employer Name				Occupation
	ng Address / Principal			Description of
Place of Busines	•			of Contribution
Full Name of Co	ntributor	r -surdicid		Date [MM/DD/YYYY] \$
				(2) (2) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
House#	Street Address			Date [MM/DD/YYYY] \$
		ı		
City	addis in the state of the	State	Zip Code	Date [MM/DD/YYYY] \$
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Employer Name			1 (1982) SETTE ATTEMPT (1982) 18	Occupation
	ng Address / Principal			Description
Place of Busines				of
		ALL 1997		Contribution Date [MM/DD/YYYY] \$
Full Name of Co	ТОЛИСТ			が表現る。 は、 は、 は、 は、 は、 は、 は、 は、 は、 は、
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
				是
Employer Name	ė		The state of the s	Occupation
Skill Subject and	ing Address / Principal	3843 <u> </u>		Description
Place of Busine				of Contribution
Full Name of Co				Date [MM/DD/YYYY] \$
ruii Name of Ci				1986年 - Nation 1986年 日本 (1986年 日本 1987年 日本 198
Linna III				Date [MM/DD/YYYY] \$
House#	Street Address	T. C.		
City		State	Zip Code	Date [MM/DD/YYYY] \$
.vires, strict				(2005)(2) (新女子 (本女子
Employer Nam	ie	The state of the s		Occupation
	ling Address / Principa			Description
Place of Busine				of Contribution
	u sastati wakalikiik	19:04:5		(1965年2028年3月5日日本年度1月6日日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日

Statement of Expenditures

Filer Identification Number:			

To Whom Paid	· · · · · · · · · · · · · · · · · · ·			Date [MM/DD/YYYY]	\$ 4220.00		
	DESANTIS SIGNS			9/21/17	1229.60		
House # 540	Street Address W	18TH ST		Description of Expendi	ture		
City ERIE	p. (0.41)	State PA	CAMPAIGN SIGNS				
To Whom Paid	DILL MADE ON SIVE			Date [MM/DD/YYYY]			
	BILL MARKOWSKI			9/1/17	9 0.00		
House # 5075	Street Address	RAMARLAC LN		Description of Expendit	ure		
City ERIE		State PA	Zip Code 16505	MCDOWELL FOOTBALL TICK	ETS		
To Whom Paid		e-181/2-1-1-1		Date [MM/DD/YYYY]	\$ 29.48		
	BILL MARKOWSKI			10/6/17	17 65 17 17 17 17 17 17 17 17 17 17 17 17 17		
House # 5075	Street Address	RAMARLAC LN		Description of Expendit	ure		
City ERIE	The state of the state of the state of	State PA	Zip Code 16505	CANDY FOR TRAIL OF TREAT	S		
To Whom Paid	····		200 - 6 - 60 gray a - 400 - 100 - 20 gray (40)	Date [MM/DD/YYYY]	35 7		
	FRIENDS OF JOHN PE	RSINGER		10/6/17	300.00		
House #	Street Address	O BOX 1981		Description of Expendit	ure .		
City ERIE State PA Code 16512				CAMPAIGN CONTRIBUTION	CAMPAIGN CONTRIBUTION		
To Whom Paid		1 = 1/300/2 strait stell strain	1.10000	Date [MM/DD/YYYY]	\$ 193.41		
	COPYRIGHT PRINTING	5		9/22/17	6.8		
House # 2827	Street Address	/ 26TH ST		Description of Expendi	ture afficient to perform the		
City ERIE	15000000	State PA	Zip Code 16506	CAMPAIGN CARDS			
To Whom Paid	COMMITTEE TO ELEC	CT ART OLIGERI		Date [MM/DD/YYYY]	300.00		
House #	Street Address			Description of Expendi	ture		
5447	B	ONDY DR					
City ERIE		State PA	Zip Code 16509	CAMPAIGN CONTRIBUTION			
To Whom Paid	· · · · · · · · · · · · · · · · · · ·	er una posk		Date [MM/DD/YYYY]	5 150.00		
	COMMITTEE TO ELE	CT JIM BOCK		10/6/17			
House # 1000	Street Address	MARIANNA		Description of Expendi	ture		
City ERIE	[0] HER STREET, 255-26-128-165-1	State PA	Zip Code 16509	CAMPAIGN CONTRIBUTION			
To Whom Paid	LAMAR ADVERTISIN	paradelesser1	Parameter Anna Anna H	Date [MM/DD/YYYY]	\$ 150.00		
House # Street Address W 12TH ST				Description of Expendi	ture		
City ERIE		State PA	Zip Code 16501	BILLBOARD	na garangan ng ganggan ganaranan na sa		

Statement of Expenditures

Filer Identification Number:			
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CONTROL STATE SERVICE			
FO SCHOOLSE SING SOURCE OF SECURISHING WINDS			
CONTRACTOR AND			
CONTRACTOR SOLVEN		 	

To Whom Paid		······································		Date [MM/DD/YYYY] \$	
	DESANTIS SIGNS			6/24/17	/1.661 A.E.I.	303.69
House# 540	Street Address w 18TH ST			Description of Expe	nditure	
City ERIE State PA Zip Code 16502				CAMPAIGN SIGNS		
To Whom Paid LAKE SHORE FD				Date [MM/DD/YYYY 7/28/17	1 \$	150.00
House # 5310	Street Address W	LAKE ROAD		Description of Exper	nditure	
City ERIE		State PA	Zip Code 16505	FUNRAISER RENTAL		
To Whom Paid				Date [MM/DD/YYY)	(] \$	100.00
	TERESAS DELI			7/28/17		TOO.GO
House # 5360	Street Address W	LAKE RD	No. AND PROCESSOR I	Description of Expe	nditure	
City ERIE		State PA	Zip Code 16506	CATERING FOR FUNDRA	ISER	
To Whom Paid	FIRST AMENDMENT T	EES	produced yangles, and	Date [MM/DD/YYY	/] \$	270.20
7 m				8/23/17 Description of Expe	nditure	
House # 1507	Street Address ST	ATE STREET			n e e N e e	
City ERIE	36. 36. 36. 36. 36. 36. 36. 36. 36. 36.	State PA	Zip Code 16501	CAMPAIGN SHIRTS		
To Whom Paid	COPYRIGHT PRINTING	3		Date [MM/DD/YYY 8/23/17	/] \$	44.55
House # 2827	Street Address	26TH ST		Description of Expe	nditure	
City ERIE		State: PA	Zip 16506	INVITATION CARDS		<u> 349 Satistication (1990) (1991) </u>
To Whom Paid	ROBERT YATES		(人名西西尔森伊特·黑廷)	Date [MM/DD/YYY 8/23/17	Y] \$	150.00
House # 1320	Street Address CI	HELSEA AVE		Description of Expe	nditure	
City ERIE	<u> </u>	State PA	Zip Code 16505	MISC FINDRAISER EXPE	SE	Actividades and the second
To Whom Paid	USPS	NEW MONTH	N. 8 a. 200 (200 a. 200 a.	Date [MM/DD/YYY 9/1/17	Y] 5	98.00
House#	Street Address	LEGION ROAD		Description of Expe	nditure	
City ERIE		State PA	Zip Code 16506	POSTAGE		<u>क्ष्यकृत्यास्थ्यस्य स्थ</u> ितः । जनस्यस्य । सन् तर्थक्षयः नदेश्य
To Whom Paid	LAMAR ADVERTISING		processor and second	Date [MM/DD/YYY	Y] \$	1077.00
House # 1565	Street Address	N 12TH ST		Description of Expe	nditure	
City ERIE		State PA	Zip Code 16501	BILLBOARD	prijeg <u>pe</u> (**19614)	- Marie - Marie Marie Marie - Andrews (東京東京)

Statement of Expenditures

Filer Identification Number:			
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· 表现是一张,是"有我的人的女子,我们是这样的,我们就是一个人的人,我们的人们			
A Contract to the Market of Later Contract Contract to the Contract Contrac			
The Country of Committee of Country of the Country			

To Whom Paid				Date [MM/DD/YYYY] \$ 270.00		
	TRI-STATE SENIOR N	NEWS		10/6/17 270.00		
House #	Street Address	PO BOX 3056		Description of Expenditure		
City ERIE	es para inversación (XVIII)	State PA	Zip Code 16508	CAMPAIGN ADVERTISEMENT		
To Whom Paid		programme visitation	In the constitution of the constitution of	Date [MM/DD/YYYY] \$		
House #	Street Address			Description of Expenditure		
City		State	Zip Code			
To Whom Paid		N 1 48 74		Date [MM/DD/YYYY] \$		
House #	Street Address			Description of Expenditure		
<u>City</u>		State	Zip Code			
To Whom Paid				Date [MM/DD/YYYY] \$		
TO STATE OF THE ST				Description of Expenditure		
House #	Street Address			Description of Expenditure		
City		State	Zip Code			
To Whom Paid				Date [MM/DD/YYYY] \$		
House #	Street Address			Description of Expenditure		
City		State	Zip Code			
To Whom Paid		4 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -		Date [MM/DD/YYYY] \$		
House #	Street Address			Description of Expenditure		
City	F10.1000 10.000	State	Zip Code			
To Whom Paid		Low street to come the exp		Date [MM/DD/YYYY] \$		
House #	Street Address			Description of Expenditure		
City	138 郵客館出版	State	Zip Code	Ers, regions en 1900, incompris vigo un Presta America (personal de la consequenciar en 1904 (personal america		
To Whom Paic		- 1996年 1916年	Europassiscasus [Date [MM/DD/YYYY] \$		
House #	Street Address			Description of Expenditure		
City	(中央) 新兴县,《李林子》。 (宋文)文章 第177月第二屆	State	Zip Code	Telahat 指用學可以以所謂的研究可以可以的發展的關鍵的是可以的可能是可能的一致的可以們可能		
sing the same of t		100 A 40 10 P	10 10 10 10 10 10 10 10 10 10 10 10 10 1	1		

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to Itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification	Number:		
AFA BASSASAFIA <u>Sist</u>			
Name of Credito	ir .		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED	S
		[MM/DD/YYYY]	
City		State Zip Code	
Description of D	w makeye walled Lebt The state of the stat	[270-22-20][VII] [155-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-	
Name of Credito	T CONTROL CONT		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED	
		[MM/DD/YYYY]	
City and the		State Zip	
Description of D	leht	Code	
TOTAL STREET			
Name of Credito	21		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	
City		State Zip	
Description of D)ebt	Côde	
			Outstanding Balance of Debt
Name of Credito	- Patrick Colesia (Ad	DATE DEBT INCURRED	S
House #	Street Address	[MM/DD/YYYY]	
		Programmer Total Section 2017	
City		State Zip Code	
Description of E	Jebt:		
Name of Credit			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED	
		[MM/DD/YYYY]	
City		State Zip	
		Code	6.1905 48.396
Description of E			
Name of Credit	OF COLUMN		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED	\$
		[MM/QD/YYYY]	100 A
City State Control		State Zip	
1 ap 15 caus - 42		Code	
Description of			